Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>06-07-2008</u>	Address:	9400 block Wolfinger Rd
Case #:	35F27856		Mt Vernon, In
County:	Poscy		
Operation	aboratory Seizure (check one) onal Lab al/Glassware/Equipment (only) te (only)	Seizure Location (c Residence Outbuilding Vehicle	Theck all that apply) Hotel/Motel Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) Lithium/Ammonia Reaction(s): Red Phosphorous/Iodine Reaction(s): Flammable Solvents: Truck bed Water Reactive Metal (Lithium): Truck bed Anhydrous Ammonia: Hydrochloric Acid Gas Generator(s): Corrosive Acid: Truck bed Corrosive Base: Other (item and location):			
Child under Yes No *If yes, fax re	er age 18 discovered (check one)(number present) port to Child Protective Services t is to be faxed to the following ager	☐ Ephedrin ☐ Retail/Mo ☑ Other: <u>Tre</u>	e Information e/Pseudoephedrine Tracking Log erchant Tip esspass complaint ocation:
Fire Departs Health Departs Child Protes For further	ment: Marrs Twp artment: Posey County ction Service: N/A information regarding this methamph	Fax: <u>812-9</u> Fax: <u>812-8</u> Fax: <u>N/A</u>	85-3823 38-8561

- This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- *** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.